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CONFIRMATION NO. 8742

SERIAL NUMBER 10/051,653	FILING DATE 01/17/2002 RULE	CLASS 435	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. 009621-39189
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/263,841 01/23/2001 DK

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/14/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 3	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	Allw/office 2/11/05 Verified and Acknowledged Examiner's Signature Initials			

ADDRESS

26345
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TITLE

Method for the diagnosis of Alzheimer's Disease and other prion related disorders

FILING FEE RECEIVED 477	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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